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| APPLICATION NO. | APPLICATION NO. FILING DATE | | FIRST NAMED INVENTOR | | ATTORNEY DOCKET NO. | | CONFIRMATION NO. | |
| 10/814,117 03/31/2004 | | | James E. Lavallee | | EMC04-10(04035) | | 5149 | |
| TITLE OF INVENTION: N | METHODS AND APPA | ARATUS FOR MANAG | ING NETWORK RESO | URCES | | | | |
| APPLN, TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1510 | \$0 | \$0 | | \$1510 | 03/19/2009 | |
| EXAMINER | | ART UNIT | CLASS-SUBCLASS | | | | | |
| MCLEOD, MARSHALL M | | 2457 | 709-224000 | | | | | |
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| Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Chapin IP Law, LLC 3 | | | | | |
| 3. ASSIGNEE NAME AN | D RESIDENCE DATA | TO BE PRINTED ON | THE PATENT (print or t | ype) | | | | |
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| a. Applicant claims | | | b. Applicant is no l | | | | | |
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| Authorized Signature _ | /Barry W. Ch | | | | | | | |
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